

Commonwealth of Massachusetts

File with: Director Office of Campaign and Political Finance One Ashburton Place Boston, MA 02108 (617) 727-8352 CPF ID# 3 735

Reporting Period from:	9/16/2001 through		9/30/2001	9/30/2001	
Date	Month Year		Date Month Year		
ame of Candidate/ Committee Robert F Goodw		in The Bob Goodwin Committee			
Office Sought:				-	
Name of Bank:	Fleet Na	ational Bank			
Beginning Balance for Reportin	g Period	\$	\$1,830.94	(1)	
		•	\$0.00	(2)	
Total Receipts in the Reporting		•	\$9.00	(3)	
Total Expenditures in the Repor	ting Period	\$			
Ending Balance for the Reportir	ng Period	\$	\$1,821.94	(4)	
I hereby declare that	the information containe	ed herein is true and correct to	the best of my knowledge a	nd belie	
		Signature of Cashier or Bank	Edmall	_	
		Denise O	'Donnell		
		Name of Cashier of Bank Tre	easurer	_	
		(617) 53	3-4332		
		Telephone Number		_	

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Form CPF D106: Receipts and Expenditures Report AMPAIGN & POLITICAL Report of Expenditures FINANCE

Bank Use Only

Candidate Name:	Robert F Goodwin			
Committee Name:	The Bob Goodwin Committee	e		
Name of Bank:	Fleet National Bank			
Reporting Period:	9/16/2001	through	9/30/2001	
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Instructions to Bank

1. The following forms have been provided for banks to fulfill the depository reporting requirements: CPF D105 Summary Sheets, to be completed and signed by the bank. CPF D 106 Contributions and Expenditures report, bank completes expenditures side only

2.To prepare the expenditures lists, the bank should first collect all checks presented for payment in the reporting period. They should then be sorted in alphabetical order. Checks should then be listed alphabetically, showing the date the check was paid, the payee's name and address, the purpose code number, the specific purpose and the amount. This information should be then from the front of the check, exactly as it was written by the committee. If any information is omitted from the check, the bank should place an asterisk (*) in the appropriate column on this form.

3. Please also list any other expenditures made from this account, including wire transfers, bank charges and fees.

Purposes of Payment

1. TV, Radio

2. Newspaper

3. Meetings

4. Printing

5. Office

6. Travel

7. Signs or Displays

8. Transfer of Funds

9. Other.....

ChkPd:	Payee:	Address:	Code Specific Pup.	Amount:
9/28/2001 FleetBank	*	9 service chg	\$9.00	
		Total Expenditures	\$9.00	